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# Report of the Independent International Commission of Inquiry on the Syrian Arab Republic

*Summary*

The cessation of hostilities agreement that came into effect on 27 February 2016 offered a glimmer of hope to those seeking a path towards a political resolution of the conflict in the Syrian Arab Republic. In the weeks that followed, there was a de-escalation of armed violence across much of the country, providing millions of civilians with some respite from the brutal war.

Since late March, however, there has been a marked upsurge in the fighting, with indiscriminate and disproportionate attacks on civilian-inhabited areas, particularly through pounding aerial bombardments. Nearly 600,000 people are now under siege, with fears growing for those living in Aleppo city. Humanitarian access, including to provide life-saving essentials such as surgical kits and medicine, is currently being blocked by some of the belligerents.

Medical workers and facilities have come under sustained and targeted attack. As a consequence, there has been a severe weakening of health-care infrastructure, particularly in areas of the country not under government control, with devastating consequences for civilians.

Away from the battlefield, civilians and hors de combat fighters continue to be disappeared, taken hostage, tortured and subjected to sexual violence, often in the context of detention. Unlawful killings, including deaths in detention and summary executions, remain a hallmark of this blood-soaked conflict.

Without a return to the peace process, the Syrian conflict, and the violations and abuses it has nourished, will continue. The sense of hope engendered earlier this year must be revitalized. In the meantime and at all times, the call to respect human rights and international humanitarian law, and to seek accountability for their infringement, must continue to resonate.

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# I. Introduction

1. In the present report, submitted pursuant to Human Rights Council resolution 31/17, the Independent International Commission of Inquiry on the Syrian Arab Republic presents its findings based on investigations conducted from 10 January to 20 July 2016.[1] The present report should be read in conjunction with previous reports of the Commission.[2]

## A. Challenges

2. The Commission's investigations remain curtailed by the denial of access to the Syrian Arab Republic.

## B. Methodology

3. The methodology employed by the Commission was based on standard practices of commissions of inquiry and human rights investigations. The Commission relied primarily on first-hand accounts.

4. The information contained herein is based on interviews conducted in the region and from Geneva. Since September 2011, the Commission has conducted 4,575 interviews.

5. Photographs, video recordings, satellite imagery and medical records were collected and analysed. Reports from Governments and non-governmental sources, academic analyses and United Nations reports formed part of the investigation.

6. The standard of proof is met when the Commission has reasonable grounds to believe that incidents occurred as described.

# II. Conflict dynamics

7. In February 2016, various parties to the conflict reached an agreement to reduce violence in the country. The cessation of hostilities agreement offered hope that a path to ending the armed conflict was possible. Led by the United States of America and the Russian Federation, the International Syria Support Group brokered this agreement between government forces and anti-Government armed groups. It had the dual focus of instituting an immediate suspension of fighting and facilitating humanitarian access to besieged and hard-to-reach areas. Terrorist organizations listed by the United Nations were not party to the agreement.

8. Humanitarian aid deliveries became possible to several besieged and hard-to-reach areas. Since late February, life-saving treatments have been delivered to besieged areas, benefiting more than 1.5 million civilians. A United Nations-led task force operating within the cessation of hostilities agreement framework has monitored humanitarian aid access and helped to facilitate expanded access for aid agencies to locations that had previously been cut-off. By 29 June, all 18 besieged neighbourhoods had received humanitarian assistance at least once in 2016 — the first time since November 2012 that humanitarian assistance

[1] The commissioners are Paulo Sergio Pinheiro (Chair), Vitit Muntarbhorn, Carla Del Ponte and Karen Koning AbuZayd.

[2] A/HRC/S-17/2/Add.1, A/HRC/19/69, A/HRC/21/50, A/HRC/22/59 and Corr.1, A/HRC/23/58, A/HRC/24/46, A/HRC/25/65, A/HRC/27/60, A/HRC/30/48 and Corr.1 and A/HRC/31/68.

reached all besieged areas at least once in the calendar year. Where land routes remained blocked, relief supplies were dropped from the air. Dozens of United Nations-assisted airdrops into western Dayr az-Zawr city, for example, were able to provide temporary relief assistance to thousands of civilians.

9. Despite these initially encouraging signs, there has been a marked upsurge in fighting since late March, with grave consequences for civilians. Pro-Government forces, allegedly targeting locations occupied by the terrorist groups Islamic State in Iraq and the Levant (ISIL) and Jabhat al-Nusra, maintained their aerial and artillery bombardments on opposition-held territories, including Idlib city, Maarat Al-Numan and eastern Aleppo city throughout the reporting period. In many instances, anti-Government armed groups have been targeted as well, resulting in retaliation and a return to fighting. Government forces launched offensive operations against opposition-held locations in the Aleppo and Damascus countryside. Intermittent shelling by anti-Government armed groups on Government-controlled areas of Aleppo has also been reported.

10. Direct external support to belligerents, as well as support filtered through proxies, continues. This has fuelled further violence and undermined prospects for a peaceful settlement. Support provided by different States to their respective protégés has had a far more significant effect than support from other sources. Such backing ensures the fragmentation and general decentralization of the conflict, making the potential for a coherent diplomatic resolution of the crisis less attainable.

11. On 14 March, the Russian Federation announced that it would withdraw a significant part of its military assets deployed in the Syrian Arab Republic since September 2015. The Russian presence in the Latakia airbase and Tartous naval base would reportedly remain, and there would be continued involvement in concerted action against the designated terrorist groups ISIL and Jabhat al-Nusra. Russian aerial support to government forces and affiliated militias continued, with varying intensity, notably in Aleppo and Idlib governorates.

12. Government forces continue to maintain an important operational edge and initiative over anti-Government armed groups and Jabhat al-Nusra on a number of front lines and in a number of localities. While losing some territory in southern Aleppo countryside, government forces have pushed through strategic locations around Aleppo city. They have taken control of the Castello road, the only access point to opposition-held areas of the city. The road is now within the direct firing range of government forces. If fully realized, a siege of Aleppo would put an estimated 300,000 civilians under siege.

13. On 27 March, government forces were able to wrest control of Palmyra, Homs, from ISIL, providing an added strategic and symbolic advantage. In Rif Damascus, considered to be the vital belt around the capital, government forces made slow but strategic gains in eastern Ghouta and the besieged town of Daraya to the west. Negotiations are also reportedly ongoing to evacuate the Yarmouk camp for Palestinian refugees, located to the south of Damascus.

14. In recent months, anti-Government armed groups continued to fight on multiple fronts. While they made modest gains — for example, in the southern Aleppo countryside — the groups have either stagnated or retreated along some vital front lines. Extensive aerial operations and support by the Russian Air Force to government forces increased infighting among various armed groups, including Jabhat al-Nusra, and the loss of crucial supply roads have generally weakened the posture of the anti-Government armed groups. Infighting between Jaysh al-Islam and Faylaq ar-Rahman reportedly led to hundreds of casualties in early June and is said to have facilitated advances of government forces into the town of Douma in eastern Ghouta. On 27 May, in the northern Aleppo countryside,

anti-Government armed groups lost strategic territory to ISIL on the Azaz and Maree axis along the Turkish border.

15. Jabhat al-Nusra continues to play a major combat role in Idlib and Aleppo. The group maintained operational links with some anti-Government armed groups in various offensives, particularly against government forces and ISIL. However, Jabhat al-Nusra's capacity has been diminished by extensive air strikes by pro-Government forces and increased infighting, particularly in Idlib, Rif Damascus and Dara'a. Political and governance differences are said to be widening with other armed groups in some of the localities, including Idlib and Aleppo. Air strikes by pro-Government forces targeting Jabhat al-Nusra have also weakened other armed groups.

16. Benefiting from extensive aerial operations and support by the international coalition against ISIL, the Syrian Democratic Forces — composed of the Kurdish People's Protection Units (YPG) and other Arab and Assyrian armed groups — have made significant territorial strides in southern areas Hasakah governorate and eastern areas of Aleppo governorate. The Syrian Democratic Forces have, however, made smaller advances towards the de facto ISIL capital of Raqqah city than they had earlier envisaged.

17. Facing pressure on multiple fronts and by a number of belligerents, ISIL continued to lose territory in the first half of 2016. In the south of Hasakah governorate, the Syrian Democratic Forces wrested control of the large Shaddadi region, putting further strain on the terrorist group's supply routes to Iraq. In north-east Aleppo, and with extensive aerial operations and support from the international coalition against ISIL, the Syrian Democratic Forces managed to fully encircle the strategic ISIL-held town of Minbij. With ISIL not allowing civilians to leave, thousands remain trapped inside the town.

18. While making moderate gains around Dayr az-Zawr city and against various armed groups in northern Aleppo, ISIL has lost significant territory to government forces in Palmyra, Homs. With those losses, the control exerted by ISIL over northern border areas and access points with Turkey appears to have been almost completely reversed. Nevertheless, the group maintains the capacity to attack on a number of fronts. It has increasingly employed explosive devices and suicide bombers in the Government-controlled areas of Latakia, Damascus and Homs.

19. As violence resurges inside the Syrian Arab Republic, the number of refugees and internally displaced persons climbs ever higher. About 6.6 million Syrians, many of them women and children, have been displaced within the country's borders. Most live in official or makeshift camps along the borders. Some camps have been shelled or aerially bombarded by belligerents. Makeshift camps offer little support to the internally displaced, with health services and education for children largely absent. That civilians continue to move into these camps underlines the grave dangers they face in the areas from which they have fled.

20. Almost 5 million Syrians have crossed the border to become refugees. The majority — more than 4 million — now live in neighbouring countries. According to the Office of the United Nations High Commissioner for Refugees, only 10 per cent of Syrians seeking safe haven from conflict have sought refuge in Europe. Many high-income countries outside of Europe have not provided any resettlement places to Syrian refugees.

# III. Resurging battlefield violence

## A. Living under fire

21. In areas where it applied, the cessation of hostilities initially resulted in a significant decrease in incidents of armed violence. As of late March, a resurgence of violence, including aerial bombardments and shelling attacks, resulted in the loss of hundreds of lives and massive destruction of infrastructure indispensable for civilian life. In areas where the agreement did not apply — areas controlled by ISIL or Jabhat al-Nusra — attacks continued unabated.

22. Aerial bombardments in densely populated areas have a devastating impact on civilians, both in terms of the human toll and the constant fear for their lives under which civilians are forced to live. On 31 March, strikes by pro-Government forces in Deir al-Asafir, an area outside Damascus controlled by anti-Government groups, hit a school, a hospital and a mosque. At least 31 people were killed, including 3 children and their parents. Several children were killed in the hospital after being evacuated from the school. The strikes caused extensive damage to the hospital, the school, the mosque and several homes.

23. Venues essential to the survival of the civilian population were the object of aerial attacks in opposition-held areas. An attack on a shop on 19 April in Kafr Nabl, Idlib, killed seven people, including three children and shoppers in a nearby fish market. Within minutes another attack in Maarat al-Numan, only 12 kilometres away, killed 37 persons in a vegetable market. On 14 June, pro-Government forces bombed Al-Hajj bridge, which connects eastern Aleppo to western Aleppo, killing at least 4 persons and injuring another 15, including women and children.

24. Internally displaced persons are among the most vulnerable to violations. Having fled from their homes to seek safety, many find themselves under attack in the camp where they sought refuge. On 30 January, pro-Government forces fired rockets to Aubin camp in Latakia, killing two people. On the same day, the Al-Yamedia camp, also in Latakia, was shelled. While there were no casualties, most of the camp's residents fled, fearing future attacks. On 2 June, shelling of the Al-Yamedia camp border crossing resulted in the death of two internally displaced men and injured a worker from a non-governmental organization. There is no information suggesting that there were military targets inside or in the vicinity of the camps.

25. In Government-held areas, civilians were terrorized by ISIL attacks. From February to June, indiscriminate attacks by ISIL claimed unprecedented numbers of casualties. The attacks, all carried out using vehicle borne improvised explosive devices and suicide bombers, invariably took place in crowded civilian areas. On 26 January, the detonation of a vehicle borne improvised explosive device at a security checkpoint, followed by a suicide bombing among the crowd that gathered after the first explosion, killed 22 persons and left another 100 injured in the Homs residential neighbourhood of Al-Zahra.

26. On 21 February, a series of explosions in Sayda Zaynab, outside Damascus, and car bombings in Homs killed 140 people. The explosions took place when shoppers were out and children were leaving school. An eyewitness described scenes of panic as the smoke of the explosions dissipated and survivors saw the carnage around them. The attack followed a double suicide attack by ISIL on Sayda Zaynab on 31 January that killed 40 civilians. The first explosion took place at a bus station and the second in a residential area.

27. On 23 May, a series of suicide bombings and detonations of vehicle borne improvised explosive devices killed at least 120 persons and injured another 200 in Jableh and Tartous, Latakia. While both cities are regime strongholds and Latakia hosts a Russian airbase, there are no indications that the attacks were directed towards a military target. Rather, the attacks targeted hospitals and a bus stop, and seem to have been a reaction to the loss of territory that ISIL had suffered in the preceding months.

28. In areas controlled by ISIL, civilians bear the brunt of explosive devices, as the group plants landmines in areas under its control, including as it retreats from lost territory. The Commission received reports of civilians being killed and injured by ISIL landmines in March and April in Al-Mabrouka, Hasakah; Tal Akhdar and Derb Hasan, Ar-Raqqah; and Merweh, Aleppo.

29. After a period of calm, anti-Government armed groups have resumed shelling of the Al-Jamiliyah neighbourhood in Aleppo city, resulting in civilian casualties. A resident of the neighbourhood recounted how on 28 April "rockets came from all directions like rain", killing at least three residents and causing panic and chaos among the population. The rockets hit a queue of people who were buying food, and locations next to a mosque and a school.

30. The Commission continues to investigate allegations of use of chemical weapons. It has received reliable information on the use of chlorine gas in the Sheikh Maqsoud neighbourhood of Aleppo city on 5 April, when four persons, including two civilians, were taken to the hospital with symptoms of chlorine gas inhalation. On the same day, Sheikh Maqsoud was under heavy shelling for several hours. A resident described how a rocket killed six members of his family, including his wife and three children, in their home.

31. On 19 July, at least 73 civilians, many of them children, were reportedly killed near Minbij, Aleppo, during international coalition air strikes against ISIL. The Commission takes note that the United States has opened a formal investigation into the killing of civilians on 19 July, the same day it carried out air strikes against ISIL positions.

## B. Living under siege

32. Nearly 600,000 civilians in Damascus, Rif Damascus, Dayr Az-Zawr, Homs and Idlib governorates continue to suffer brutal conditions created by protracted sieges. While government forces are responsible for the majority of sieges countrywide, ISIL has surrounded the Government-held neighbourhoods of Dayr Az-Zawr city since June 2014 and Jabhat al-Nusra, acting alongside anti-Government armed groups, encircled the Shia enclaves of Foua'a and Kafria, Idlib, in March the following year. More than 6 million civilians currently struggle to survive in besieged and hard-to-reach communities. Despite some improvements in humanitarian access to besieged areas — achieved through the cessation of hostilities agreement — the absence of sustained cooperation by parties to the conflict continues to cause acute malnutrition and, increasingly, death.

33. International law prohibits the use of starvation as a method of warfare, as well as the denial to civilians of safe passage from besieged areas.

34. Government forces have laid siege to the western Ghouta suburb of Daraya, Rif Damascus, since November 2012. Residents described subsisting on harvest crops and living without electricity over the years since. Water lines to Daraya were cut in 2013, forcing inhabitants to use unsanitary wells for both hygiene and consumption. As in Douma, eastern Ghouta, medicines for chronic illnesses were not available. In Douma, parts of which have been besieged since 2013, residents recounted how Syrian forces allowed entry of no more than 25 per cent of required medical supplies. Often, remaining physicians in both areas are forced to practice outside their areas of specialty.

35. On 12 May, a convoy led by the United Nations, the International Committee of the Red Cross and the Syrian Arab Red Crescent carrying essential medical supplies, nutrition items and hygiene materials headed for Daraya was turned back at a checkpoint, despite previous assurances by the Government that it would be allowed to pass. On 1 June, five trucks containing baby formula, vaccines and non-food items were allowed to enter the town, marking the first such delivery in over three and a half years. On 9 June, the United Nations and the Syrian Arab Red Crescent were ultimately granted access to provide foodstuffs to Daraya. The following day, government forces heavily bombarded civilian-inhabited areas, seriously hindering the distribution of vital aid for another three days.

36. Before a ceasefire was reached in December 2015, government forces had denied the entry of medical supplies into the Al-Waer neighbourhood of Homs city for three years. Currently, government forces impose a ban on fuel, and residents in Al-Waer described using electric heaters to burn wood, plastic or clothing for cooking. During the winter, elderly persons died, having succumbed to the harsh weather. By spring, residents resorted to eating grass and wild plants. On 14, 16 and 18 July, teams comprising staff from the United Nations, International Committee of the Red Cross and the Syrian Arab Red Crescent were able to deliver crucial shipments of food and health items to Al-Waer.

37. Since Jabhat al-Nusra and anti-Government armed groups tightened their siege around Foua'a and Kafria in March 2015, both towns have suffered shortages of food and fuel and a lack of electricity and water. In September 2015, an agreement was reached between government forces and anti-Government armed groups, including Ahrar al-Sham, concerning the Rif Damascus mountain towns of Madaya and Zabadani and the Idlib villages of Foua'a and Kafria. Parties to the agreement continue to use the delivery of humanitarian aid as a tool for political bargaining, which has left all four localities deprived of humanitarian assistance since 30 April. Incidents of malnutrition are increasing in those areas. The Commission continues to receive accounts of deaths by starvation in Madaya, where government forces carry on using starvation as a weapon of war.

38. In Madaya, families described cases of infant malnutrition resulting from the difficulties that starving mothers have in producing sufficient breast milk and from a lack of baby formula. In Al-Waer, the price of powdered milk, when available, is so exorbitant that one father recalled diluting the milk for his one-and-a-half-year-old daughter with water so as to not run out. Over the reporting period, at least three children between the ages of 5 and 6 died in Madaya as a result of malnutrition and disease.

39. Pre-war economies throughout besieged areas have all but collapsed and given way to extortive siege economies, with devastating impact. As the only entry points into besieged areas, checkpoints continue to serve as opportunities for extortion, where belligerents profit off of the desperation of confined populations. Residents in eastern Ghouta, Dayr Az-Zawr and Homs detailed price surges for basic commodities. The profits of siege economies may also provide financial incentives to deny truces.

40. The Security Council, through its resolutions 2165 (2014), 2191 (2014) and 2258 (2015), has authorized the unconditional delivery of humanitarian assistance, including medical assistance, to besieged and hard-to-reach communities countrywide. Despite marked progress, however, no sieges have been lifted in recent months. During the period under review, the Office for the Coordination of Humanitarian Affairs observed an increase of 103,500 Syrians living in besieged areas, as well as 870,000 more civilians in areas considered hard to reach.

41. The Commission is gravely concerned about the at least 300,000 civilians residing in eastern Aleppo city, where the last remaining supply line of Castello Road was cut by government forces in July, and about civilians in Minbij, Aleppo, living under ISIL control

who are now encircled by advancing Syrian Democratic Forces. A further 70,000 to 90,000 displaced Syrians remain trapped in an uninhabitable desert area near the southern border.

## C. Assaults on medical care

42. Since March 2011, attacks on medical care have characterized the unrest, and now conflict, in the Syrian Arab Republic. Medical workers, including doctors, dentists, nurses, paramedics, ambulance drivers and laboratory technicians, have been attacked for attending to the wounded. Many have been killed and injured. Others have fled with their families across the Syrian borders, seeking refuge. Hospitals, clinics and ambulances have been destroyed. As a consequence, there has been a severe weakening of health-care infrastructure, particularly in areas of the country not under government control. This has had a disastrous impact on the civilian population, with particularly adverse consequences for infants, young children, pregnant women, lactating mothers, the disabled and those with chronic illnesses.

43. In the past six months, there has been a surge of attacks affecting people and places providing medical care. The majority of the attacks have been carried out by pro-Government forces. The pattern of attacks, and in particular the repeated bombardments, strongly suggests that there has been deliberate and systematic targeting of hospitals and other medical facilities during this reporting period. Some anti-Government armed groups and the terrorist group ISIL have also attacked medical workers and facilities in Government-held areas.

44. Perhaps nowhere has the government assault on medical care been felt more strongly than in the opposition-controlled areas of Aleppo city and governorate, where at least 20 hospitals and clinics have reportedly been destroyed since January. Many of those attacks have caused the death of medical personnel and first responders.

45. In mid-January, government forces barrel-bombed Al-Sakhour hospital in Aleppo. The barrel bomb landed close to the hospital, which serves patients with mental health disorders, killing at least two patients and injuring staff and other patients. The hospital has reportedly been bombarded over a dozen times since early 2014.

46. In late January and early February, government forces reportedly attacked a field hospital in Maskan village, as well as a field hospital and rehabilitation centre in Anadan. Several staff members, including a nurse, were killed in the attack on the Anadan hospital. In early February, planes belonging to pro-Government forces bombarded a field hospital, a rehabilitation centre and a dialysis centre in Tal Rifat in northern Aleppo. Medical staff and patients were injured and the facilities closed, leaving the area with no medical care.

47. On 15 February, pro-Government planes bombarded the street outside a maternity hospital in Azaz in northern Aleppo governorate. Approximately five civilians in the areas outside the hospital were killed, including two guards who were on staff. An interviewee described his relief that none of the infants lying in the incubators had been killed. The hospital itself was severely damaged and closed.

48. On 27 April, there were three aerial bombardments of the area surrounding the Al-Quds hospital, supported by Médecins sans frontières, in the Al-Sukari neighbourhood of Aleppo city. Al-Quds had been the main paediatric referral hospital in Aleppo governorate. Each bombardment struck progressively closer to the hospital, the final one destroying an apartment building, in which many hospital staff resided, only 10 metres from the hospital. A doctor, a dentist, two nurses, a security officer and a maintenance technician were killed, as were approximately 55 people living in the apartment building, which collapsed into rubble. More than 100 people were injured. Essential equipment, including seven

incubators, and drugs were destroyed. The hospital, notably its emergency room, paediatric unit and laboratory, sustained such damage that the hospital was forced to close.

49. Less than a week after the attack on Al-Quds hospital, the Security Council unanimously adopted its resolution 2286 (2016), in which it called for an end to attacks on health-care workers and facilities and affirmed the principle, codified in the Geneva Conventions of 1949, that medical personnel and infrastructure are not to be targeted during warfare.

50. Resolution 2286 (2016) had little impact on the battlefield, where attacks on medical workers and facilities continued with impunity. On 8 June, government jets dropped two barrel bombs near the Al-Bayan trauma hospital and the adjacent Al-Hakim paediatric hospital in Aleppo city. Two points, both within 20 metres of the hospitals, were hit, killing civilians in the area and destroying several buildings. The barrel bombs started a large fire and many of those killed, including a 12-year-old boy, were burned to death. Several walls of the Al-Bayan hospital collapsed and the medical store was set ablaze. Attempts to extinguish the fire damaged the remaining medicines.

51. On 20 July, government forces bombarded a forensic hospital in Aleppo city, injuring five medical workers and damaging the building. The following day, the hospital was destroyed by two barrel bombs.

52. With the opposition-controlled areas of Aleppo city and Aleppo governorate under heavy bombardment by government forces, the loss of every doctor and every clinic leaves civilians without the services that they need in order to survive. As life is made increasingly impossible, those who are able flee. Left behind are those physically unable to flee, including the elderly, the injured and the disabled. The most impoverished members of the community also stay, unwilling to leave what property they own and without sufficient funds to travel and live with dignity elsewhere. Men and boys over the age of 13 years also stay, afraid they will be killed, beaten or disappeared at government checkpoints.

53. As the Government attacks the only supply route into the areas of Aleppo city under the control of armed groups, the attack on medical facilities appears to form part of the already documented siege campaign, which is designed to force the fall of the city, and to pave the way for the advance of ground forces in northern Aleppo governorate.

54. Recent attacks on medical workers and facilities were also documented in Idlib, Damascus and Latakia governorates. On 15 February, the same day as the attack on the maternity hospital in Azaz, government planes twice bombed an medical centre run by Médecins sans frontières in Maarat al-Numan, killing approximately nine people and injuring many more. The second attack occurred 15 minutes later, and appeared to target first responders. The hospital was entirely destroyed, with approximately 25 killed, including 9 members of the medical team and 16 patients. Dozens were trapped in the rubble for up to 48 hours before being rescued.

55. On 30 May, shortly after the adoption of resolution 2286 (2016), pro-Government planes heavily bombarded Idlib city. One strike hit the area directly outside of the Idlib National Hospital. There were no casualties of the attack affecting the hospital, although casualties were documented in other areas of the city.

56. On 20 July, government forces intensely bombarded Idlib city. Al-Watani hospital was hit, killing four civilians. Seventeen people were reported injured. The hospital was put out of service. Later on the same day, the health directorate was heavily damaged in a government air strike. Later, the health services in Idlib released a public message, indicating that the health-care infrastructure had been badly damaged and that it would be difficult to resume operations.

57. On 31 March, government forces aerially bombarded the only hospital in the Damascus suburb of Deir al-Asafir. Over 30 people are believed to have been killed, almost half of whom were children. Dozens were injured. On the same day, shelling from pro-Government forces hit the hospital of the Al-Yamedia camp for internally displaced persons in Latakia. While no casualties were recorded, the attack put the hospital out of operation.

58. In none of the reported attacks were military targets present near the hospitals. The hospitals and clinics attacked were all reportedly serving their humanitarian function.

59. Medical personnel have also been killed by sniper fire. On 25 March, a sniper killed Dr. Mohammed Khous as he was leaving Zabadani field hospital in Rif Damascus. Snipers also fired at those trying to rescue him. Dr. Khous was reportedly Zabadani's last doctor. Civilians have reportedly died from injuries sustained by sniper fire in Zabadani because of a lack of doctors and medicine at the hospital.

60. Members of the Syrian Civil Defence, who provide medical aid at the point of injury and who transport the wounded to nearby medical centres, have been killed in air strikes by pro-Government forces. On 26 April, an aerial attack, reportedly by pro-Government forces, struck a Civil Defence centre in Atarib, Aleppo. Five Civil Defence volunteers were killed and three were injured. On 15 June, an aerial strike hit a Civil Defence centre in Kafr Takharim, Idlib, killing a boy. The centre was destroyed, as were all the Civil Defence vehicles used for rescue and transport of the wounded.

61. As noted above, government forces blocked medical supplies and equipment from entering besieged areas, including Daraya, Douma, Madaya and Zabadani, in Rif Damascus, and the Al-Waer neighbourhood of Homs.

62. Anti-Government armed groups have also attacked health-care facilities, albeit on a far smaller scale. In February and March, armed groups heavily shelled the Sheikh Maqsoud neighbourhood of Aleppo city, held by YPG. On 6 March, rockets fell in the vicinity of the hospital. While the hospital itself was not struck, the rocket fire caused the collapse of several neighbouring buildings, killing over a dozen civilians, including four children.

63. On 3 May, an armed group in the Bani Zeid neighbourhood of Aleppo city launched a rocket attack, striking areas around Doubait maternity hospital in Al-Muhafada neighbourhood. The facade of the hospital was destroyed, as were surrounding businesses. Approximately 15 people were killed, including 3 who were inside the hospital. Twenty people, including hospital staff, were injured. The hospital closed shortly afterwards.

64. ISIL has also attacked hospitals, as part of a wave of suicide bombings on civilian targets, terrorizing the civilian population. On 23 March, five ISIL suicide bombers exploded themselves in different locations in Jableh, Latakia. While the sequence of the bombing is disputed, it appears that, as casualties from the first two explosions were rushed to nearby hospitals, the third bomber exploded himself in front of the Al-As'ad hospital and the fourth, inside the emergency ward of Jableh National Hospital. The bombing inside the National Hospital caused mass casualties, killing 15 members of the medical team and many patients, including those who had been injured in the earlier bombing and who had been transported to the hospital for treatment. Over 50 people were injured. The emergency department was completely destroyed, although the hospital was able to reopen a few days later.

65. In deliberately attacking hospitals, medical units and health-care workers, those responsible have violated international humanitarian law with respect to the duty to care for the sick and wounded, and have committed the war crime of attacking protected objects.

The continued assaults on medical care deprive civilians and injured fighters of medical treatment, increasing the loss of life and the number of persons maimed.

# IV. Continuing violence behind the line

66. Much attention has been paid to the wax and wane of the cessation of hostilities agreement, and its impact on the country's disparate battlefields. The decrease in violence during the months when the warring parties more closely adhered to the agreement vastly improved the conditions of civilian life. Such gains must not, however, obscure the fact that many of the often less visible violations appear to have continued unabated throughout the reporting period.

## A. Unlawful killings

67. Unlawful killings, including deaths in detention and summary executions, remain a hallmark of a blood-soaked war.

68. Reports of detainees perishing in government custody continued to be received from those fleeing the conflict. Consequently, there is sometimes a delay between families learning of the death and their accounts being documented. In March 2012, Military Security agents arbitrarily detained a man at his workshop in Dara'a. Having learned his whereabouts from a released prisoner, the man's wife visited him twice in Sednaya prison in Damascus in early 2014. She described him as "emaciated" and barely able to stand on his own. In June 2016, she was informed that her husband had died of a heart attack in August 2014 and that she could go to Tishreen military hospital to obtain his death certificate. Sednaya prison is run by the military police corps of the army. Other similar accounts were received during the period under review.

69. While information indicates that government agencies retain information on the whereabouts of thousands of detainees and register their deaths, the practice of informing families in the event of death is random and irregular. In none of the cases documented did the Government surrender the body of the victim to the next of kin.

70. The massive and systematized nature of deaths in State-controlled detention facilities amounts to crimes against humanity and war crimes, as detailed in the report entitled "Out of sight, out of mind: deaths in detention in the Syrian Arab Republic".[3] Together with the failure to conduct transparent investigations, the Government has violated the right to life of those who have died in its custody.

71. Jabhat al-Nusra continues to govern communities through makeshift, unauthorized courts whose procedures bear no resemblance to a fair trial. In March, a court in Sarmada, Idlib, convicted three suspects of kidnapping for ransom, after which they were summarily executed. Such killings amount to the war crime of execution without due process.

72. On 20 July, Jabhat al-Nusra released a video in which its fighters summarily executed 12 government soldiers they had held hostage. The soldiers are shown being asked to state their names for the camera, after which they are all killed by gunshots to the head.

73. ISIL continues to unlawfully kill perceived enemies, including civilians and hors de combat fighters. On 26 February, ISIL militants camouflaged in YPG uniforms stormed Hammam al-Turkman village, Ar-Raqqah. During a three-day offensive, the terrorist group

[3] Available from www.ohchr.org/EN/HRBodies/HRC/IICISyria/Pages/Documentation.aspx.

captured a member of the Syrian Democratic Forces, as well as a father and son accused of being YPG informants. All three were executed. Prior to retreating, ISIL fighters reportedly captured and burned alive no fewer than four YPG soldiers who had been manning a checkpoint. In late March, the terrorist group also reportedly kidnapped, brutally tortured and executed seven armed group fighters in the town of Tafas, Dara'a.

74. In late May, after government forces retook Palmyra, Homs, from ISIL, a mass grave containing more than 60 bodies was discovered. The corpses are believed to be government soldiers and members of the allied National Defence Forces who were either executed at close range or beheaded.

## B. The disappeared and the missing

75. Civilians, mainly men of fighting age, continue to vanish from the streets of the Syrian Arab Republic. Tens of thousands of Syrians are missing, many in circumstances that suggest they have been forcibly disappeared.

76. Enforced disappearance infringes the victim's fundamental human rights, including the rights to liberty, to personal security and to a fair trial. A crime under international law, enforced disappearance is a violation that persists for as long as the victim's whereabouts remain unknown. It often serves as a gateway to other violations, including torture and murder.

77. In a pattern that began in March 2011 and which continues to this day, Syrians are arrested or abducted by State agents and thereafter disappear from public view. Relatives continue to report cases of those who disappeared between 2011 and 2015. Common sites of arrest and abduction include checkpoints, hospitals, workplaces and homes.

78. Throughout the Commission's existence, Syrians have recounted the terror they feel when passing through government checkpoints for fear of being taken and never heard from again. Some women indicated the final trigger for their becoming refugees was the fact that their adolescent sons faced increasing risks of being held at checkpoints. This fear is well justified: many Syrians have had family members vanish following arrest or abduction by government forces. One man, recently interviewed, did not know the whereabouts of 10 members of his family, who all disappeared in Rif Damascus in 2013 and 2014.

79. Other victims have disappeared while imprisoned, having been transferred from a known detention centre to an unknown location. A man disappeared after being arrested in Damascus in 2012 and held at an official detention centre for more than two years. Attempts by his family to locate him, including through bribes to government officials, have been unsuccessful.

80. Payment of bribes to officials remains commonplace. Families spend large sums attempting to purchase information that sheds light on the fate of their loved ones. The amounts paid vary, and are seemingly dependent on the families' resources and the importance of the person being sought.

81. Armed groups have adopted practices leading to acts tantamount to enforced disappearance. Amongst the missing individuals are human rights defenders Razan Zaitouneh, Samira al-Khalil, Wael Hamada and Nazem Hammadi, who were abducted in Douma — then under the control of Jaysh al-Islam — in 2013.

82. During the reporting period, Jabhat al-Nusra abducted and detained individuals in Al-Ghouta al-Sharkiyah, Rif Damascus. One man was held in December 2015 and released almost a month later. Jabhat al-Nusra fighters, on receiving inquiries from the man's relatives, denied that he was in their custody.

83. Where ISIL detains individuals in its territory, the victims' fate and whereabouts are often discernible because the group's punishments or demands for ransom are usually public. However, there are individuals who remain missing following their abduction. This includes Father Paolo Dall'Oglio, who was abducted in Raqqah city in January 2014. Despite rumours of his murder, his death has not been confirmed.

84. The impact on families of the disappeared is devastating. Without knowledge of their fate, it is difficult — if not impossible — to mourn the loss. The severe mental distress of family members rises to a level that breaches their right not to be subjected to torture or other cruel, inhuman or degrading treatment.

85. In the Syrian Arab Republic, where men are the primary breadwinners, the enforced disappearance of adult male relatives has an acute impact. Many of the women interviewed have no means of supporting themselves, and have to rely on men in their extended families. With husbands and fathers missing for years, and without confirmation of death, female family members are left in a legal limbo, unable to sell or inherit property, or to remarry.

86. Given the large number of missing and disappeared in the country, and the deep distress of the affected families, the release of political prisoners and arbitrarily detained civilians, the tracking of missing and victims of enforced disappearance, and future monitoring of places of detention should form part of confidence-building measures preparing the way for inclusive political negotiations aimed at bringing the conflict to an end.

## C. Hostage-taking

87. As the conflict has dragged on and a war economy has taken hold, instances of hostage-taking have risen. Armed groups, including those designated as terrorist groups, have taken hostages in order to effect prisoner exchanges, or for ransom. Women and children are particularly vulnerable to being taken hostage, as families usually move quickly to collect money to pay the ransom, or exert pressure on opposing forces to arrange a prisoner swap.

88. In March 2015, armed groups, including Ahrar al-Sham, attacked Idlib city, taking dozens hostage. Ahrar al-Sham released the hostages in two batches in January and February 2016, following the release of individuals held by pro-Government armed groups from Foua'a and Kafria.

89. On 23 February 2015, ISIL attacked Assyrian Christian villages along the Khabour river in Hasakah. The terrorist group took approximately 200 civilians hostage. The last group of hostages was released in late February 2016. Many of the children, who were forced to watch violent ISIL propaganda, including videos of executions, remain highly traumatized.

90. Government forces arrested or abducted family members of men believed to be fighting against the Government. Those detained in such circumstances are effectively held hostage and are released only when their male relative hands himself in.

91. Members of the warring factions are using the cover of war to enrich themselves. Fighters from armed groups, as well as government soldiers and pro-Government militia members, have detained individuals until such time as their families pay for their release. In such contexts, it is often difficult to discern whether the motives behind particular arrests or abductions are conflict related, or instances of criminal opportunism.

## D. Torture

92. The continuing use of torture in the Syrian Arab Republic dramatically underscores the impunity with which the warring parties conduct themselves. Torture is employed as a means of extracting information, and to punish and inflict terror on the civilian population.

93. The use of torture by government forces, particularly its intelligence and security agencies, has been documented by the Commission since its inception. It is extremely rare to find an individual who has been detained by the Government who has not suffered severe torture.

94. The majority of victims are men between the ages of 18 and 60. However, government officials also torture women and children in their custody. The accounts collected relate to torture in government detention centres occurring between 2011 and the reporting period. Some former prisoners only felt able to speak about what they had endured once they had become refugees and lived in places that granted them greater assurances of their physical safety. Others were so traumatized that it took them months, sometimes years, before they were willing to speak about being tortured.

95. Some victims were targeted for arrest because they were activists or otherwise perceived to be not sufficiently supportive of the Government. In other cases victims of torture were, or were perceived to be, members of armed groups or related to members of such groups. A woman believed to have been involved in food distribution in an area not controlled by the Government was arrested in Hama in mid-2014. She was transferred to an intelligence agency in Homs where she was beaten, hung by her wrists and given electric shocks. When transferred to Military Security Branch 235, she saw guards kick male detainees and beat them with pipes and cables.

96. Many victims display physical scars of the abuse they suffered. One man, held in an intelligence agency in Damascus city in 2015, had nerve damage as a result of being hung from his wrists, with his hands tied behind his back, for prolonged periods of time. Former detainees suffer from the psychological after-effects of torture, including feelings of anger, depression and isolation.

97. Conditions in places of detention, particularly those controlled by intelligence agencies, remain abysmal. Former detainees reported a dearth of food, potable water, space, sleep and hygiene and medical care. Reports of lice infestations and infected wounds continue to be regularly recorded. One detainee, held in Hama prison for over three years, stated he had lost more than half his body weight while detained. One woman, held in Dayr az-Zayr in 2015, described losing so much weight that she stopped menstruating.

98. Poor detention conditions had a particularly negative impact on prisoners with physical disabilities. One man, held in a western Syrian governorate, was paralysed on his right side. He relied on other prisoners to assist him in eating, bathing and using the bathroom.

99. The failure of those in charge of detention centres to provide detainees with medical care had a profound impact on those with chronic illnesses and diseases, such as cancer, diabetes and epilepsy. Lack of access to medical care hastened, and in some cases caused, the death of detainees.

100. Between March 2015 and February 2016, Ahrar al-Sham held hostage approximately 55 men, women and children from Idlib city. Some of the hostages, including one woman, were beaten and given electric shocks. While held in Idlib prison, male hostages were beaten. They received little food and no medical care or access to sunlight.

101. Jabhat al-Nusra is reportedly holding detainees in makeshift prisons in Rif Damascus. One man, held in a basement in January 2016, described being beaten by Jabhat al-Nusra fighters until he lost consciousness. Other cellmates were hung from their wrists. Detainees were given little food and were denied medical treatment.

102. Civilians who fled or were released from ISIL-controlled areas provided accounts of the use of torture in ISIL detention centres in Raqqah and Aleppo. Women held in those centres reported hearing sounds of male detainees being severely beaten by prison guards.

103. ISIL publicly lashes and amputates civilians and fighters for infractions of the terrorist group's regulations. Men and boys are lashed in a public square in Raqqah city for smoking cigarettes and for trading during prayer times. Women suffer lashings for not been adequately covered. Men and women are lashed for being in the company of members of the opposite sex from outside their families. Theft is punishable by amputation.

## E. Sexual violence

104. The trauma resulting from sexual violence, and the profound social stigma attached to being a victim, continue to deter female and male survivors from coming forward. Months, and often years, pass before a survivor may be willing to have her or his account documented. The consequent underreporting and delayed reporting of sexual violence has rendered any assessment of its magnitude challenging. The accounts below are representative of cases that have only recently been documented by the Commission as victims and witnesses have come forward during the reporting period.

105. Women have been raped by officials during interrogations in detention centres controlled by government intelligence agencies. One woman, held in a detention centre in Government-controlled Dayr az-Zawr in 2015, was brutally raped by the interrogating officer of the Military Intelligence Directorate. On another occasion, he doused her in water and shocked her with electrodes attached to her breasts. Another woman, detained in Branch 235 in 2014, stated that prison officers raped several of her cellmates.

106. In late 2011, government forces arrested relatives of a man suspected of being a member of an armed group. Those arrested included his 9-year-old daughter; a doctor who examined the girl concluded that she had been raped. The girl suffers from nightmares and has difficulties being separated from her mother. Another interviewee, raped by a government official during her detention, said: "I feel I have lost everything. I lost my job and my property. And I have lost my dignity."

107. One woman held in detention in 2014 described the guards pinching female detainees and threatening them with rape as they were transferred from an intelligence agency in Aleppo to another in Homs. During interrogations, several female detainees reported being threatened with rape, being called whores and being questioned about their sexual history.

108. Male detainees are frequently subjected to sexual violence. Many stated that cellmates had been raped with objects and received electric shocks to their genitals. A man, held in an Air Force Intelligence branch in Hama in 2013, stated that cellmates had been raped with knives and other implements, which caused physical injuries. Another detainee, held in Dayr az-Zawr from mid-2011 to the spring of 2012, was stripped naked and hung by his wrists from the ceiling in a room with a female detainee, who was similarly naked and hung from her wrists. "We stood naked and humiliated in front of each other," he said.

109. ISIL fighters have forcibly married Sunni women living in ISIL-controlled areas. Accounts have been received of ISIL fighters demanding women and girls in marriage, in circumstances where it would have been dangerous for the woman or her family to refuse.

Women and girls whose fighter-husbands have died are pressured by ISIL to marry another fighter quickly because it would be risky to resist the group's entreaties.

110. Thousands of Yazidi women and girls, some as young as 9 years old, are sold in slave markets in the governorates of Raqqah, Aleppo, Homs, Hasakah and Dayr az-Zawr. Passed from fighter to fighter as chattel, they endure brutal rapes and are punished with severe beatings and gang rapes when they try to escape. The rape, sexual enslavement and other forms of sexual violence committed by ISIL fighters against Yazidi women and girls held in the Syrian Arab Republic are detailed in the report entitled: "'They came to destroy': ISIS crimes against the Yazidis".[4]

## V. Impact of the conflict on children

111. Syrian children continue to be victims of violations by all warring parties. Continually exposed to unbearable levels of violence, they suffer from ongoing, multiple and frequently untreated trauma. An interviewee described how a 5-year-old became suicidal after seeing maimed bodies while fleeing from Minbij. The lack of suitable health care and adequate food further endangers their lives, while the lack of access to education deprives them of future opportunities.

112. Aerial attacks by pro-Government forces have killed hundreds of children in opposition-held areas. On 11 January, an aerial raid killed at least 11 children between the ages of 6 and 12 in a school in Ain Jara, Aleppo. The next day, an air raid in Sarmada, Idlib, a town under Jabhat al-Nusra's control, killed three children.

113. Aerial bombardments continued to result in child casualties in May, particularly among communities of internally displaced persons. On 5 May, three children died in the makeshift school in the Kamouna camp for internally displaced persons in Idlib. One interviewee described the victims' bodies as scorched beyond recognition. On 29 May, government rockets killed two children, aged 7 and 12, while they were playing in the Al-Sakhour neighbourhood of Aleppo city.

114. ISIL continues to carry out indiscriminate attacks that result in the death of children. A series of attacks in Sayda Zaynab, Damascus, killed dozens of civilians, including a 6-month-old baby. Another attack on the Government-controlled towns of Jableh and Tartous killed at least four children. Children as young as 11 years old were killed or maimed by landmines planted by ISIL as it retreated from villages around Kobane and Hasakah cities. Children working in agricultural fields are particularly exposed to this danger.

115. On 12 May, four girls and one 13-year-old boy were killed when Jabhat al-Nusra, Al-Tawhid brigades and Ahrar al-Sham took over Zara village in Hama. Of the 17 persons still missing, 8 are children. Many other children were injured during the attack, including a 4-year-old girl and a 16-year-old boy with Down syndrome. A 15-year-old described how she was shot in the arm while attempting to flee the village with her 6-year-old sister.

116. On the first day of Eid al-Fitr, 6 July, Jaysh al-Fatah rockets in Al-Zahra, Aleppo, killed 3 children, aged 11 and 12. Another 11 children sustained shrapnel wounds; 1 remains in critical condition.

117. Between April and May, Jabhat al-Nusra and Jund al-Aqsa recruited hundreds of children, many under the age of 15, in Idlib, Hama and Aleppo. The recruitment followed campaigns by jihadist ideologues in internally displaced persons camps, mosques and other public spaces. The boys were promised monthly salaries as an incentive for impoverished

[4] Available from www.ohchr.org/EN/HRBodies/HRC/IICISyria/Pages/Documentation.aspx.

families to agree to the recruitment. In Al-Bab, Aleppo, ISIL offers $100 to $150 monthly to young men and boys, some only 14 years old, to join.

118. In Aleppo, the armed groups Nour al-Din al-Zinki and Sultan Murad Brigades also take advantage of the population's poverty to recruit boys as young as 14, to whom they offer a monthly salary. Boys are under additional pressure when they are the oldest male family member and are expected to support the family. In Government-controlled areas, Popular Committees and the National Defence Forces reportedly recruit minors into their ranks and send them to battle without providing them with any military training.

119. Under constant bombardment and unable to pay for the high prices of food, families struggle to feed their children. Children, particularly infants, living in besieged areas are adversely affected by the lack of food.

120. A family from Madaya, still under government siege, recounted how their 10-year-old daughter wrote her will, believing she would die of hunger. Also in Madaya, a mother described how the situation became unbearable after the man who smuggled baby formula was maimed by a landmine. After some of their children's friends starved to death, some parents decided to risk leaving the besieged areas.

121. In Aleppo, children suffer from malnutrition, with babies under the age of two being particularly affected owing to the low supply of milk for babies. A mother described how bread and potatoes were the best options to feed her oldest children. The cutting off of the Castello road, Aleppo's lifeline, further endangers food supplies, with a potentially devastating impact for children. In Al-Waer, there are reports of children dying of malnutrition.

122. Attacks on infrastructure affect children disproportionately. On 27 April, a barrel bomb landed in the vicinity of Al-Quds hospital, killing three children and one of the few paediatricians in Aleppo. A 1-year-old child was rescued from the rubble one day after the attack, which killed his mother and siblings. On 8 May, an air missile landed 50 metres away from Al-Hakim hospital in Aleppo, forcing the evacuation of 10 babies in incubators.

123. Cases of children suffering from tuberculosis, cholera, meningitis and polio have resurfaced, owing to the inability of medical services to carry out full vaccination campaigns. A notable exception took place in March when the Government allowed a shipment of vaccinations to Douma. At least 20 children aged 1 to 3 years old were taken by Jaysh al-Islam members to a clinic where they received vaccinations.

124. On 27 May, government forces hit a school in Aleppo. There were no casualties but the school was damaged. Many schools are no longer running, and those still operational are often unable to give classes due to ongoing shelling. There is a lack of primary school teachers and no universities in rebel-held areas. In camps for internally displaced persons, hundreds of thousands of children are not attending school owing to overpopulation and the dire situation of the camps.

125. In Helwanyia village in Jarablus, Aleppo, all schools are closed. Boys receive religious education and ISIL gives children guns to play with. In Al-Bab, ISIL has allowed some schools to reopen but children are required to wear a *jalabyia* and are reportedly taught how to use weapons.

126. In Daraya, where only two makeshift schools function, volunteer teachers lack relevant credentials. Owing to an intensification of shelling by pro-Government forces since August 2015, children stopped regularly attending school.

127. The ongoing violence, coupled with the collapse of the educational system outside Government-held areas, continues to force children to work for survival. A mother described how she sent her 13-year-old son from ISIL-controlled Zaraaya, Aleppo, to

Lebanon so that he could escape ISIL recruitment and work to support the family. Similarly, many children who fled to Turkey work to help their families. In the Syrian Arab Republic, children take any work — from selling vegetables to smuggling fuel — to support their families.

# VI. Conclusions and recommendations

## A. Conclusions

128. **The cessation of hostilities agreement, which came into effect on 27 February 2016, offered a glimmer of hope to those seeking a path towards a peaceful resolution of the conflict. Its dual focus on guarantees for humanitarian access and ceasefires in several parts of the country seemingly presaged a potential political track to discuss peace. Led by the United States and the Russian Federation, the International Syria Support Group and its related task forces have provided much-needed momentum to identify sources of intransigence.**

129. **In the weeks following the agreement, there was a de-escalation of armed violence across much of the country, providing millions of civilians with some respite from the brutal war. Since late March, however, there has been a marked upsurge in the fighting, with indiscriminate and disproportionate attacks on civilian-inhabited areas, particularly through pounding aerial bombardments.**

130. **On this front, the efforts of the Special Envoy of the Secretary-General for Syria, Staffan de Mistura, deserve stronger support to generate greater traction towards peace.**

131. **There has been some measure of improvement in humanitarian access, with limited supplies having reached all 18 besieged areas. Where land routes remain blocked, relief supplies have been dropped by air to help besieged populations. Since the beginning of 2016, the United Nations and its partners have delivered multisectoral assistance to over 1 million civilians in besieged and hard-to-reach areas.**

132. **Yet, sieges continue in breach of international humanitarian law, with nearly 600,000 people trapped. Humanitarian access, including to provide life-saving essentials such as surgical kits and medicine, is currently being blocked by some of the belligerents. Supplies are running out for hundreds of thousands. Aleppo is a key flashpoint.**

133. **The cessation of hostilities agreement brought a welcome respite for civilians that lasted all too briefly. Since April, breaches have occurred with greater regularity and intensity. Moreover, the agreement did not cover areas held by ISIL, where stronger action is needed. Fighting Jabhat al-Nusra has been highly complicated, especially where it occupies civilian-inhabited areas.**

134. **Medical workers and facilities have come under sustained and targeted attack. As a consequence, there has been a severe weakening of health-care infrastructure, particularly in areas of the country not under government control, with devastating consequences for civilians.**

135. **The plight of internally displaced persons and refugees is now of gargantuan proportions, with transborder and transcontinental implications. This underlines the need for more robust cooperation on assistance and protection of persons on the move, with due regard to equitable international responsibility-sharing and exemplary leadership.**

136. **Away from the battlefield, civilians and hors de combat fighters continue to be disappeared, taken hostage, tortured and subjected to sexual violence, often in the context of detention. Unlawful killings, including deaths in detention and summary executions, remain a hallmark of this blood-soaked conflict.**

137. **The Commission repeats: without a return to the peace process, the Syrian conflict, and the violations and abuses it has nourished, will continue. The sense of hope engendered earlier this year must be revitalized. This demands a shared commitment from and action by all the key parties to de-escalate the conflict and to negotiate constructively.**

138. **In the meantime and at all times, the call to respect human rights and international humanitarian law, and to seek accountability for their infringement, must continue to resonate.**

## B. Recommendations

139. **The Commission reiterates the recommendations made in previous reports. It also makes the recommendations below.**

140. **The Commission recommends that all parties:**

(a) **Restore and revitalize the cessation of hostilities, minimize civilian casualties and end indiscriminate attacks on the civilian population;**

(b) **Allow safe, sustained, unhindered and unconditional access to humanitarian aid and respect access to basic necessities;**

(c) **End all sieges immediately, introduce humanitarian truces as pauses from the fighting to reach trapped civilians and enable life-saving services to be delivered, and respect people's freedom of movement;**

(d) **Release detainees, particularly women and children, and treat all persons who are deprived of liberty humanely;**

(e) **Facilitate the tracing of the disappeared and missing, and ensure monitoring of locations and situations linked therewith;**

(f) **Prohibit and prevent absolutely torture and other cruel, inhuman or degrading treatment, including sexual violence;**

(g) **Ban effectively the recruitment and use of children in hostilities, and guarantee effective protection of child rights, including access to education and protection from child labour;**

(h) **Protect humanitarian workers, including medical personnel, facilitate the rapid and unimpeded passage of relief supplies, and safeguard the sanctity of hospitals and medical transport;**

(i) **Prohibit and prevent the use of illegal weapons and related arms trade and trafficking.**

(j) **Protect the country's cultural heritage and historic sites and prevent indiscriminate attacks against them.**

(k) **Strengthen measures and ensure more effective cooperation against terrorists listed by the Security Council.**

**141. The Commission recommends that the Government of the Syrian Arab Republic:**

**(a) Cease indiscriminate attacks on civilian-inhabited areas;**

**(b) Allow the Commission access to the country.**

**142. The Commission recommends that anti-Government armed groups repudiate extreme elements and apply effective pressure for compliance with international law.**

**143. The Commission recommends that countries with influence over the warring parties, in particular the permanent members of the Security Council, work in concert to engage with the parties to end the violence, in the pursuit of an all-inclusive and sustainable political transition process in the country.**

**144. The Commission recommends that the international community:**

**(a) Curb the proliferation and supply of weapons, and address the sources thereof;**

**(b) Sustain and expand funding and other supports for humanitarian operations;**

**(c) Protect the human rights of all persons, including migrants, internally displaced persons, asylum seekers and refugees, which are part of customary international law, and comply with obligations under international human rights treaties, the Convention relating to the Status of Refugees and the Protocol thereto and other relevant instruments.**

**145. The Commission recommends that the Human Rights Council support the recommendations made, including by transmitting the present report to the Secretary-General for the attention of the Security Council in order that appropriate action may be taken, and through a formal reporting process to the General Assembly and to the Security Council.**

**146. The Commission recommends that the General Assembly support its recommendations and enable the Commission to offer regular briefings.**

**147. The Commission recommends that the Security Council:**

**(a) Support its recommendations;**

**(b) Include regular briefings by the Commission as part of the formal agenda of the Security Council;**

**(c) Take appropriate action by referring the situation to justice, possibly to the International Criminal Court or an ad hoc tribunal, bearing in mind that, in the context of the Syrian Arab Republic, only the Security Council is competent to refer the situation;**

**(d) leverage its influence with the relevant actors and stakeholders to ensure a comprehensive and all-inclusive peace process that maintains due respect for human rights and international humanitarian law.**

# Annex

## Map of the Syrian Arab Republic